

**FEC
FORM 3X**
**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED

2014 OCT 15 AM 10:50

Office Use Only
FEC MAIL CENTER1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

ADDRESS (number and street)

555 East Wells Street, Suite 1100

Check if different
than previously
reported. (ACC)

Milwaukee

WI

53202-3823

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00324780

3. IS THIS
REPORT☒NEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2014

through

09

30

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Kevin Beier

Signature of Treasurer

Date

10

08

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
OnlyFEC FORM 3X
Rev. 12/2004

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2014

To:

MM / DD / YYYY
09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		244754.95
(b) Cash on Hand at Beginning of Reporting Period.....	263780.35	
(c) Total Receipts (from Line 19)	1549.38	23324.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	265329.73	268079.74
7. Total Disbursements (from Line 31)	1.75	2751.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	265327.98	265327.98
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Report Covering the Period:

From:

07 / 01 / 2014

To:

09 / 30 / 2014

I. Receipts

COLUMN A Total This Period

COLUMN B Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

750.00

13150.00

(ii) Unitemized

700.00

9896.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

1450.00

23046.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

1450.00

23046.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received.....

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

99.38

278.79

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5).....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

1549.38

23324.79

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

1549.38

23324.79

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A **Total This Period**

COLUMN B **Calendar Year-to-Date**

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal
Activity (from Schedule H4)
(i) Federal Share

0.00

0.00

- (ii) Non-Federal Share

0.00

0.00

- (b) Other Federal Operating
Expenditures

1.75

251.76

- (c) Total Operating Expenditures
(add 21(a)(i), (a)(ii), and (b))

1.75

251.76

22. Transfers to Affiliated/Other Party
Committees

0.00

0.00

23. Contributions to
Federal Candidates/Committees
and Other Political Committees

0.00

2500.00

24. Independent Expenditures
(use Schedule E)

0.00

0.00

25. Coordinated Party Expenditures
(2 U.S.C. §441a(d))
(use Schedule F)

0.00

0.00

26. Loan Repayments Made

0.00

0.00

27. Loans Made

0.00

0.00

28. Refunds of Contributions To:
(a) Individuals/Persons Other
Than Political Committees

0.00

0.00

- (b) Political Party Committees

0.00

0.00

- (c) Other Political Committees
(such as PACs)

0.00

0.00

- (d) Total Contribution Refunds
(add Lines 28(a), (b), and (c))

0.00

0.00

29. Other Disbursements

0.00

0.00

30. Federal Election Activity (2 U.S.C. §431(20))

- (a) Allocated Federal Election Activity
(from Schedule H6)

- (i) Federal Share

0.00

0.00

- (ii) "Levin" Share

0.00

0.00

- (b) Federal Election Activity Paid Entirely
With Federal Funds

0.00

0.00

- (c) Total Federal Election Activity (add ..
Lines 30(a)(i), 30(a)(ii) and 30(b))

0.00

0.00

31. Total Disbursements (add Lines 21(c), 22,
23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

1.75

2751.76

32. Total Federal Disbursements
(subtract Line 21(a)(ii) and Line 30(a)(ii)
from Line 31)

1.75

2751.76

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-
penditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

33. Total Contributions (other than loans)
(from Line 11(d), page 3)
34. Total Contribution Refunds
(from Line 28(d))
35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b)) ►
37. Offsets to Operating Expenditures
(from Line 15, page 3).....
38. Net Operating Expenditures
(subtract Line 37 from Line 36) ►

1450.00
0.00
1450.00
1.75
0.00
1.75

23046.00
0.00
23046.00
251.76
0.00
251.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 7

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial)

A. Dr. Cheryl L. Dickason

Mailing Address 17938 Shotley Bridge Place

City

State

Zip Code

Olney

MD

20832

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Providence Hospital, DC

EM attending

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 21 / 2014

Transaction ID : SA11AI.4822

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Brian J. Wiecezorek

Mailing Address 513 Route 259

City

State

Zip Code

Ligonier

PA

15658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

IvanStoker, LLC

Emergency Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 29 / 2014

Transaction ID : SA11AI.4824

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

750.00

TOTAL This Period (last page this line number only).....▶

750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 7

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial)

A. BMO Harris Bank NA

Mailing Address N14 W23999 Stone Ridge Drive

City

Waukesha

State

WI

Zip Code

53188

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.79

Date of Receipt

09 / 30 / 2014

Transaction ID : SA17.4818

Amount of Each Receipt this Period

99.38

Interest Earned on Account

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

99.38

TOTAL This Period (last page this line number only).....▶

99.38

0000 1 1111 11001

FedEx carbon-neutral
envelope shipping

FedEx
Express

FedEx US Airbill
Express

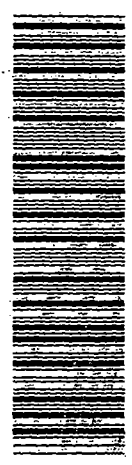
8577 5390 2023

1 From
Date 10/11/2014 Sender's FedEx Account Number 2049-5687-1
Sender's Name Dr. Kevin Beier Phone
Company AAEM
Address 5102 Yale Court
City Brentwood State TN ZIP 37027
Dept./Floor/Room

2 Your Internal Billing Reference

3 To
Recipient's Name Federal Election Commission Phone
Company Commission
Recipient's Address 999 E Street, NW
We cannot deliver to P.O. boxes or P.O. ZIP codes.
Address Washington State DC ZIP 20463
Dept./Floor/Room

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8577 5390 2023

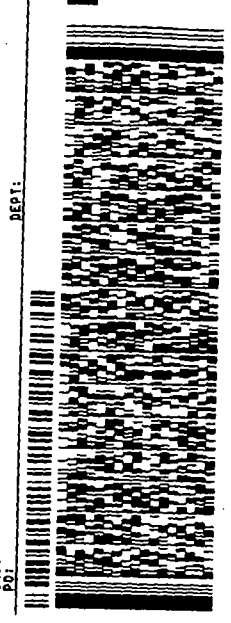
SHIP DATE: 14OCT1
ACTWT: 0.2 LB
CAD: /POS1525
DIMS: 0x0x0 IN
BILL SENDER

ORIGIN ID:THAA (414) 276-7390

555 E WELLS ST STE 1100
MILWAUKEE, WI 532023800
UNITED STATES US

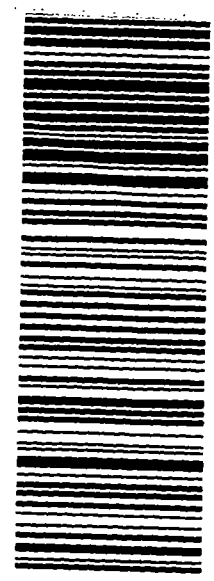
FEDERAL ELECTION COMMISSION
999 E ST NW

WASHINGTON DC 20463
REF: (800) 424-8630
DEPT:



TRK# 8577 5390 2023
WED - 15 OCT
PRIORITY OV

XC RDVA



Total Weight

Total Charges
Credit Card Auth.

to Guide for details
our require a signature, check Direct or indirect.

2023
10.15


520

RT677 6

8 NEW

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Rev. Date 6/05-Pack

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): FEDEX	Shipping Date 10/14/14
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (8/2013)	10/15/14 DATE PREPARED

FROM: MR. COOPER